

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TEF	623	5/7/06-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Final	Original	Date
1	✓		5/2/06
2	✓		5/2/06
3	✓		5/2/06
4		✓	
5		✓	
6		✓	
7		✓	
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23	✓	✓	5/2/06
24	✓	✓	5/2/06
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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